L24000510369

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
2/24





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FEB 24 S. PRATHER



February 13, 2025

RGBP CONSTUCTION LLC 4256 SW 20 ST FT LAUDERDALE, FL 33317

SUBJECT: RGBP CONSTUCTION LLC

Ref. Number: L24000510369

We have received your document for RGBP CONSTUCTION LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Letter Number: 125A00003225

Stacy Prather Regulatory Specialist III

www.sunbiz.org

COVER LETTER

Division of Co	orporations		
	ONSTUCTION LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
r lease feuth an correst	sondence concerning this matter	to the tollowing.	
	Barbara Beltre		
		Name of Person	
	RGBP CONSTUCTION E	.LC	
		Firm/Company	
	4256 SW 20 ST		
		Address	
	Ft Lauderdale, FL 33317		
		City/State and Zip Code	
	barbiebel3@hotmail.com	to be used for future annual report noti	fication)
For further information	concerning this matter, please c		
Barbara Beltre		305 397-4208	
Name	of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addr</u> Registration		<u>Street Address:</u> Registration Sec	ction
	Corporations	Division of Cor	

P.O. Box 6327

Tallahassee, FL 32314

TO:

Registration Section

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RGBP Construction LLC		÷ .
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L24000510369	were filed on 12/9/24	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Bel3 Construction LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		_
Principal office address MUST BE A STREET ADDRESS)	2216 W 80 St Suite 6	
	Hialeah, FL 33016	
Enter new mailing address, if applicable:	4256 SW 20 ST	
(Mailing address MAY BE A POST OFFICE BOX)	Ft. Lauderdale, FL 33317	
		 .
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, enter the nar	ne of the new regist
	, Florida	
	, riorida	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			Change
			🗆 Add
			□Remove
			Change
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			□Remove
			□ Change
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fective date, if other than the	date of filings		_ (optional)
n effective date is listed, the date mus	t be specific and cannot be prior	to date of filing or more than 90 o	lays after filing.) Pursuant to 605.020
ote: If the date inserted in this blocument's effective date on the D	ock does not meet the applic enartment of State's records	able statutory filing requirem	ents, this date will not be listed a
ecord specifies a delayed effective	e date, but not an effective ti	me_at 12:01 a.m. on the earli	er of: (b) The 90th day after th
is filed.	- one, our not an effective ti	on the carri	
			~
February 24th ited	2025		2025 F
		<u> </u>	
	1300	orized representative of a member	<u> </u>

Filing Fee: \$25.00

Typed or printed name of signee